In re Perry J. Ward			
Debtor(s) Case Number:	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):		
(If known)	☐ The presumption arises.		
	■ The presumption does not arise.		
	☐ The presumption is temporarily inapplicable.		

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS					
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).					
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.					
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.					
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.					
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard					
	a.   I was called to active duty after September 11, 2001, for a period of at least 90 days and  I remain on active duty /or/  I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;					
	OR					
	<ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>					

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		Part II. CALCULATION OF M	ON	THLY INCO	ME FOR § 707(b)(	7) F	EXCLUSION	
	Mari	ital/filing status. Check the box that applies as	nd c	omplete the balanc	e of this part of this state	emer	nt as directed.	
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.							
	ь. 🗆	Married, not filing jointly, with declaration of	of se	parate households.	By checking this box, o	lebto	or declares under	penalty of perjury:
		"My spouse and I are legally separated under a						
2		purpose of evading the requirements of § 707(						
	i	for Lines 3-11.						
		Married, not filing jointly, without the decla				b ab	ove. Complete b	oth Column A
		("Debtor's Income") and Column B ("Spou						
		Married, filing jointly. Complete both Colu				'Spo	use's Income'')	for Lines 3-11.
		gures must reflect average monthly income re-					Column A	Column B
		dar months prior to filing the bankruptcy case					Debtor's	Smarrania
		ling. If the amount of monthly income varied			you must divide the		Income	Spouse's Income
		nonth total by six, and enter the result on the a						
3	<b>.</b>	s wages, salary, tips, bonuses, overtime, con				\$	819.00	\$ 0.00
		me from the operation of a business, profess						
		the difference in the appropriate column(s) of						
		ness, profession or farm, enter aggregate numb						
4		nter a number less than zero. Do not include b as a deduction in Part V.	any	part of the busine	ess expenses entered on			
4	Line	b as a deduction in 1 art v.	<u> </u>	Debtor	Spouse	ı		
	a.	Gross receipts	\$	0.00				
	b.	Ordinary and necessary business expenses	\$	0.00				
	c.	Business income		btract Line b from		\$	0.00	\$ 800.00
	_					IΨ	0.00	Ψ σσοίσσ
		<b>s and other real property income.</b> Subtract leppropriate column(s) of Line 5. Do not enter a						
		of the operating expenses entered on Line b						
5	Purt	or the operating expenses entered on Zine s		Debtor	Spouse	ı		
	a.	Gross receipts	\$	0.00				
	b.	Ordinary and necessary operating expenses	\$	0.00				
	c.	Rent and other real property income		btract Line b from		\$	0.00	\$ 0.00
6	Inter	est, dividends, and royalties.				\$	0.00	\$ 0.00
7		ion and retirement income.				\$	0.00	
	Δnv	amounts paid by another person or entity, o	m a	regular basis for	the household	T		
		nses of the debtor or the debtor's dependent						
8		ose. Do not include alimony or separate maint						
		se if Column B is completed. Each regular page						
	if a p	ayment is listed in Column A, do not report th	at p	ayment in Column	B.	\$	0.00	\$ 0.00
		nployment compensation. Enter the amount i						
		ever, if you contend that unemployment comp						
9		fit under the Social Security Act, do not list the		nount of such comp	ensation in Column A			
		but instead state the amount in the space belo	w:			ı		
		mployment compensation claimed to benefit under the Social Security Act Debtor	r <b>\$</b>	<b>0.00</b> Spe	ouse \$ 0.00	\$	0.00	Φ 0.00
	<b>-</b>	concint ander and social security free				2	0.00	\$ 0.00
		me from all other sources. Specify source and						
		separate page. Do not include alimony or sep						
	spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse							
10								
	a.   \$   \$							
	b. \$ \$							
	Total and enter on Line 10					\$	0.00	\$ 0.00
11		otal of Current Monthly Income for § 707(b						
	Colu	mn B is completed, add Lines 3 through 10 in	Col	umn B. Enter the	total(s).	\$	819.00	\$ 800.00

		_				
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Column A to Line 11, Column B, and enter the total. If Column B has not been complet the amount from Line 11, Column A.			1,619.00		
	Part III. APPLICATION OF § 707(b)(7) EXC	LUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line enter the result.	12 by the number 12 and	\$	19,428.00		
14	<b>Applicable median family income.</b> Enter the median family income for the applicable st (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of t					
	a. Enter debtor's state of residence: MI b. Enter debtor's household	size: 2	\$	51,554.00		
	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.					
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the	does no	ot arise" at the			
	top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.  The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.					

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Complete 1 at is 1 v, v,	vi, and vii of this	statement omy ii required	. (See Line 13.)	
	Part IV. CALCULATION	OF CURREN	F MONTHLY INCO	ME FOR § 707(b)(2	2)
16	Enter the amount from Line 12.				\$
Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.  [a.]					
	b.		\$		
	c. d.		\$ \$		
	Total and enter on Line 17		Φ		\$
18	Current monthly income for § 707(b)(2).	Subtract Line 17 fro	om Line 16 and enter the res	ult.	\$
	-		EDUCTIONS FROM		
	Subpart A: Deduction	s under Standard	ls of the Internal Reven	ue Service (IRS)	
National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$
19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.				
	Persons under 65 years of age		Persons 65 years of age	or older	
	a1. Allowance per person b1. Number of persons	a2. b2.	Allowance per person Number of persons		
	c1. Subtotal	c2.	Subtotal		\$
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					\$

20B	not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rental expense \$ b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 \$					
21	c. Net mortgage/rental expense Subtract Line b from Line a.  Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:					
22A	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.					
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)					
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  □ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42  C. Net ownership/lease expense for Vehicle 1  Subtract Line b from Line a.					
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42  c. Net ownership/lease expense for Vehicle 2  Subtract Line b from Line a.					
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal,					

	Other Necessary Expenses: involuntary deductions t	for employment. Enter the total average monthly payroll			
26		n as retirement contributions, union dues, and uniform costs.	\$		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term				
27	life insurance for yourself. <b>Do not include premiums</b> any other form of insurance.	for insurance on your dependents, for whole life or for	\$		
	Other Necessary Expenses: court-ordered payments	Enter the total monthly amount that you are required to			
28		gency, such as spousal or child support payments. <b>Do not</b>	r.		
			\$		
29	the total average monthly amount that you actually exp	ent or for a physically or mentally challenged child. Enter lend for education that is a condition of employment and for			
	education that is required for a physically or mentally c providing similar services is available.	challenged dependent child for whom no public education	\$		
30	Other Necessary Expenses: childcare. Enter the total	l average monthly amount that you actually expend on	Ψ		
30		preschool. Do not include other educational payments.	\$		
		tal average monthly amount that you actually expend on			
31		f yourself or your dependents, that is not reimbursed by is in excess of the amount entered in Line 19B. <b>Do not</b>			
	include payments for health insurance or health savi	ings accounts listed in Line 34.	\$		
	Other Necessary Expenses: telecommunication servi	ices. Enter the total average monthly amount that you your basic home telephone and cell phone service - such as			
32	pagers, call waiting, caller id, special long distance, or	internet service - to the extent necessary for your health and			
	welfare or that of your dependents. Do not include any	y amount previously deducted.	\$		
33	Total Expenses Allowed under IRS Standards. Ente	er the total of Lines 19 through 32.	\$		
	Subpart B: Additi	onal Living Expense Deductions			
	Note: Do not include any ex	spenses that you have listed in Lines 19-32			
	Health Insurance, Disability Insurance, and Health the categories set out in lines a-c below that are reasons dependents.	Savings Account Expenses. List the monthly expenses in ably necessary for yourself, your spouse, or your			
34	a. Health Insurance	\$			
	b. Disability Insurance	\$			
	c. Health Savings Account	\$	\$		
	Total and enter on Line 34.				
	If you do not actually expend this total amount, state below:	e your actual total average monthly expenditures in the space			
	\$				
		family members. Enter the total average actual monthly			
35	expenses that you will continue to pay for the reasonab ill, or disabled member of your household or member of	ole and necessary care and support of an elderly, chronically of your immediate family who is unable to pay for such			
	expenses.	of your immediate family who is unable to pay for such	\$		
26	Protection against family violence. Enter the total ave				
30	actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
		mount, in excess of the allowance specified by IRS Local	\$		
37	Standards for Housing and Utilities, that you actually e	expend for home energy costs. You must provide your case			
	claimed is reasonable and necessary.	and you must demonstrate that the additional amount	\$		
		<b>18.</b> Enter the total average monthly expenses that you			
38	actually incur, not to exceed \$147.92* per child, for atte				
	documentation of your actual expenses, and you must explain why the amount claimed is reasonable and				
	necessary and not already accounted for in the IRS Standards.				

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					\$	
40			Enter the amount that you will continganization as defined in 26 U.S.C. § 1			e form of cash or	\$
41	Total	Additional Expense Deductions	s under § 707(b). Enter the total of L	Lines 34	4 through 40		\$
		Sı	ubpart C: Deductions for De	bt Pa	yment		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
		Name of Creditor	Property Securing the Debt	Ave		Does payment include taxes or insurance?	
	a.			\$		□yes □no	
				Tot	tal: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.  Name of Creditor  Property Securing the Debt  1/60th of the Cure Amount a.						
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.						\$
			If you are eligible to file a case under the amount in line b, and enter the res				
45	a. Projected average monthly Chapter 13 plan payment.  b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  c. Average monthly administrative expense of Chapter 13 case  Total: Multiply Lines a and b					\$	
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.					\$	
	Subpart D: Total Deductions from Income						
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					\$	
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION							
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))					\$	
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))					\$	
50	Mon	thly disposable income under § 7	707(b)(2). Subtract Line 49 from Line	e 48 an	d enter the resu	lt.	\$
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.					\$	

	Initial presumption determination. Check the applicable box and proceed as directed.						
52	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					
	☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the re						
	☐ The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part	VI (Lines 53 through 55).					
53	Enter the amount of your total non-priority unsecured debt	\$					
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$					
	Secondary presumption determination. Check the applicable box and proceed as directed.						
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does no of this statement, and complete the verification in Part VIII.	t arise" at the top of page 1					
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.						
	Part VII. ADDITIONAL EXPENSE CLAIMS						
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for you and your family and that you contend should be an additional deduction from your current monthly income 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average each item. Total the expenses.	e under §					
	Expense Description Monthly A	mount					
	a. \$						
	b. \$						
	c.						
	Total: Add Lines a, b, c, and d \$						
	Part VIII. VERIFICATION						
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is	a joint case, both debtors					
57	must sign.) Date: February 15, 2013 Signature: /s/ Perry J. Ward						
31	Perry J. Ward (Debtor)						

<sup>\*</sup> Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.